								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2001									57	5	310	~02	
Effective October 1, 2001													
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE				OTHER		
TOTAL CLAIMS			(Coldinii I)		(Coldinin 2)				OR I I	SMALL			
									FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC FEE 370.00		370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			/ / minus 20=		* 0		X\$ 9=			OR	X\$18=		
INDEPENDENT CLAIMS			3 minus 3 =		<u>* </u>		X42=			OR	X84=		
MULTIPLE DEPENDENT CLAIM P			RESENT			+140=)=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTA			OR	TOTAL	240		
CLAIMS AS AMENDED - PART II								`-		1011	OTHER	164	
			(Column 2)			SMALL ENTITY		ENTITY	OR	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIĞH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=		
	Independent	*	Minus	***		=	X42			OR	X84=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT			T CLAIM		+140				2000			
								= TAL		OR	+280=		
								EE		OR ,	ADDIT. FEE		
_		(Column 1) CLAIMS			mn 2)	(Column 3)							
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	X\$ 9	=	V	OR	X\$18=		
	Independent	*	Minus	***		=	X42	=		OR	X84=		
Ľ	FIRST PRESE	NTATION OF M	JLTIPLE DE	PENDEN	CLAIM		+140)=		OR	+280=		
								TAL			TOTAL		
		(O-1 4)		VO-1-	0)	(Cal 0)	ADDIT. I	EE		J~''	ADDIT. FEE		
		(Column 1) CLAIMS			mn 2) HEST	(Column 3)		_	ADDI]		ADDI	
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=		
	Independent	*	Minus	***			X42			OR	X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									UH			
	Idaha asa-si		h		- +O" !	okuma 3	+140			OR	+280=		
**	If the "Highest Nu	ımn 1 is less than t ımber Previously P	aid For IN Th	HIS SPACE	is less th	an 20, <mark>enter "20</mark> ."	TO ADDIT. I	TAL		OR	TOTAL ADDIT. FEE		
		umber Previously P nber Previously Pa					r found in th	е ар	propriate bo	x in co	lumn 1.		

Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 16 7/1/-Effective January 1, 2003 CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN TYPE ____ (Column 1) (Column 2) OR SMALL ENTITY Oldri... TOTAL CLAIMS RATE FEE RATE FEE FOR OR BASIC FEE NUMBER FILED NUMBER EXTRA BASIC FEE \$375 \$750 TOTAL CHARGEABLE CLAIMS minus 20= X\$ 9= X\$18= OR INDEPENDENT CLAIMS rimar 3 a X42= 'x 811. MULTIPLE DEPENDENT CLAIM PRESENT +140= +280= OR. * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN SMALL ENTITY OR SMALL ENTITY (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI REMAINING NUMBER PRESENT RATE TIONAL RATE TIONAL AFTER PREVIOUSLY **EXTRA** AMENDMENT PAID FOR FEE FEE Total Minus λ\$9-朱\$18= OR 1 Independent 11. Minus * * * ×42= 204 OB FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140 4 125cm ADDIT FEEL លាសារាជា ខ្លាំ (ខែមហ្គារ នេះ (Column to CLAHAL HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT RATE TIONAL AMENDMENT RATE TIONAL AFTER PREVIOUSLY EXTRA PAID FOR AMENDMENT FEE FEE Total Minus ** X\$ 9= X\$18= ORI Minus Independent X42 =X84= OR. FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= +280-OR TOTAL OB ADDIT FEE ALIHI FEE (Column 1 (Column 2) (Column 3 HIGHEST CLAIMS ADDI-ADDI-មិស្រាក់មួ NUMBER PRESENT RATE TIONAL. TIONAL AMENDMENT FREGIOUSET RATE AFTER EXTRA AMENDMENT PAID FOR FEE FEE Total $\supset G$ 4 1 1 14 41 Mode Independent *** >42= 8 6.1 ΉF FIRST PRESENTATION OF MULTIPLE DEFENCENT CLAIM • 140± 4: But * If the entry in a symmetric began to the many type OR ADDIT FEE ** If the Highest Number Fig. 10 is, Faid Fig. 14, This SEASE spens than 2, lenter 2 *** If the "Highest Number French John Food Food Na THIS SEAGE is less than 3 lenter 197 ALIDIT FEE. The Harris Charles Compared to the transfer of the transfer of the appropriate to the